

VA North Texas Health Care System

Postdoctoral Fellowship Training Program 2020-2021 Training Year



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
VA North Texas Health Care System

Psychology Training Director (116A)
VA North Texas Health Care System
4500 S. Lancaster Rd.
Dallas, TX 75216

<http://www.northtexas.va.gov/psychology>

Table of Contents

The Setting	3
Living in Dallas.....	3
VA North Texas Health Care System	4
Postdoctoral Fellowship.....	5
Background	5
Training Model and Program Philosophy	5
Training Goals and Objectives.....	7
Program Structure	7
Program Requirements.....	9
Pursuit of Licensure.....	9
Facility and Training Resources.....	10
Substance Abuse Emphasis.....	10
Overview	10
Training Opportunities.....	11
Supervisory Staff	11
Lesbian-Gay-Bisexual-Transgender Health Care Emphasis.....	12
Overview	12
Training Opportunities.....	14
Supervisory Staff	14
Patient Aligned Care Team (PACT) Emphasis.....	15
Overview	15
Training Opportunities.....	16
Supervisory Staff	17
Post-Traumatic Stress Disorder (PTSD) Emphasis.....	22
Overview	22
Training Opportunities.....	24
Supervisory Staff	25
Administrative Policies and Procedures	26
Application Process.....	28
Contact Information.....	31
Director of Psychology Training	31
Accreditation Status.....	31
Fellowship Admissions, Support, and Initial Placement Data.....	32
Appendix A: Compilation of Supervisory Staff Bios	34
Appendix B: Placement of Past Fellows	38

The Setting

Living in Dallas



The Dallas-Fort Worth Metroplex is a thriving metropolitan area of 5 million people, including over 40% who consider themselves ethnic minorities. There is a dynamic and growing arts community including both professional and community theater groups, the Dallas Symphony, Dallas Civic Opera, The Fort Worth Ballet, the Dallas Museum of Art, the Kimbell Art Museum, and the Amon Carter Museum of Western Art. There are also hundreds of shops, galleries, and restaurants throughout the city. Outdoor recreation is abundant with many areas available for backpacking and rock climbing and with several area lakes suitable for fishing, water skiing, and other water sports. Major league professional athletics include football (the Dallas Cowboys), baseball (the Texas Rangers and three minor league teams), basketball (the Dallas Mavericks), hockey (the Dallas Stars), and soccer (the FC Dallas).

Housing is readily available throughout the city within easy commuting distance from the medical center, which is located 10 miles south of downtown Dallas and is served by several traffic arteries. Information concerning housing, transportation, and employment opportunities may be obtained from the Dallas Chamber of Commerce, 1597 Pacific, Dallas, Texas 75201.

The Dallas area is a major educational center in the Southwest. The area fosters training in academics and science in addition to the arts and humanities. Area universities include the University of Texas Southwestern Medical Center, the University of Texas at Dallas, the University of Texas at Arlington, Texas Woman's University in Denton, University of North Texas in Denton, Southern Methodist University in Dallas, Dallas Baptist University, and the University of Dallas. Dallas is also the site for many professional workshops, seminars, and conventions. There is a state professional organization, the Texas Psychological Association, and local professional organizations, the Dallas Psychological Association and the Tarrant County Psychological Association, that fellows may join as student members. The state organization frequently holds its annual convention in Dallas, and students are encouraged to submit their research for presentation at this convention. The local organizations hold monthly meetings that address a variety of issues of concerns to psychologists in the area. A number of specialized professional and student organizations are active in the area.

Fun Facts about the Dallas

- Dallas is the only city in the South Central region of the United States to be considered of key importance for the global economy
- The Dallas Arts District is the largest center of Urban Art in the United States
- Dallas is the home of many inventions, including the microchip, electronic traffic light, car radio, and maraca machine
- German chocolate cake was actually named after the creator, Sam German, a native Dallasite, and not the country of Germany
- Dallas' Galleria mall is home of America's tallest indoor Christmas tree
- Dallas is the home of many well-known stores, brands, and television shows, including 7-Eleven, Neiman Marcus, Barney the Dinosaur, Wishbone the dog, and, obviously, *Dallas*
- The NFL's Super Bowl was allegedly inspired by Dallas' Super Ball (deputant ball)
- Dallas was home to the first outdoor shopping center
- DFW allegedly has more shopping malls per capita than any other metro area in the United States
- Notorious American Outlaws, Bonnie and Clyde, first met in Dallas.

Visit www.visitdallas.com for city information.

VA North Texas Health Care System



VA North Texas Health Care System (VANTHCS) headquarters in Dallas has multiple locations (listed below) serving veterans in North Texas and southern Oklahoma.

- Dallas VA Medical Center
- Polk Street VA Clinic, Dallas
- Plano VA Outpatient Clinic
- Fort Worth VA Outpatient Clinic
- Tyler VA Outpatient Clinic
- Sam Rayburn Memorial Veterans Center, Bonham

VANTHCS serves 38 north Texas and 2 southern Oklahoma counties and is one of 5 designated Centers of Innovation by the Office of Patient Centered Care and Cultural Transformation. Current trends indicate continued growth of the number of patients served through VANTHCS.

Our facility houses the largest VA Mental Health Service Line in the nation. This makes our hospital rich with clinical training opportunities in the area of psychology and mental health. VANTHCS provides mental health services across levels of care, including primary care mental health integration, general outpatient, residential and domiciliary treatment, and inpatient psychiatry.

The VA North Texas Health Care System's training in Psychology includes APA-Accredited programs at the Doctoral and Postdoctoral levels. Supervisory psychologists are members of the Psychology Section of our Mental Health Service. There are now approximately 100 doctoral-level, licensed psychologists who provide clinical care, many of whom are available as clinical supervisors. Fellows will work with one to two Primary Supervisors during their fellowship year depending on the selected emphasis area. In addition fellows will work with a separate supervisor for their Evidence-Based Psychotherapy (EBP) rotation. Training sites include general mental health, substance use treatment, PTSD, LGBT emphasis, primary care medicine, specialty care medicine and surgery, and rehabilitation programs. Training occurs in both inpatient and outpatient venues.

VANTHCS is teaching hospital, with over 2000 trainees of all disciplines working and learning in our medical center each year. As such, providing excellent clinical training is a significant priority not just for our fellowship program, but for our facility as a whole. Our trainees are respected and supported regardless of where they work in our sprawling medical center.

Postdoctoral Fellowship

Background

With the postdoctoral program's inception in 1992, the area of emphasis of the program had been Substance Abuse. The program, however, is accredited more broadly in the specialty of "Clinical Psychology." In 2007, the program was awarded a third position with an emphasis in Geropsychology. In 2010, a fourth position with the Patient Aligned Care Teams, a medical psychology training fellowship associated with primary care, was granted. In 2012, an inter-professional fellowship was awarded in Geropsychology/Substance Abuse and a fellowship position was awarded in Mental Health for Family/Couples Therapy working primarily with OEF/OIF veterans and their families. The Neuropsychology fellowship positions were awarded in 2013. The Neuropsychology Fellowship is a separately APA accredited specialty program. A fellowship position emphasizing PTSD treatment was awarded in 2015. In 2019, the Family/Couples emphasis area was changed to a second PTSD fellowship position and the Geropsychology emphasis was changed to LGBT.

Training Model and Program Philosophy

Training for clinical practice is sequential, cumulative, and graded in complexity. Fellows acquire and develop an increased degree of knowledge and skills over the course of the training year, through supervision, didactics, and the experiential learning inherent in working in an inter-disciplinary medical setting.

The primary educational goal of our program is to train competent "above-entry-level" psychologists, with well-rounded skills as well as specific proficiencies, whose clinical practice is informed by the professional literature. Our programmatic goals are consistent with the VA's mission of preparing individuals for possible employment within VA. The areas of emphasis include psychological assessment, neuropsychological assessment, psychotherapy and other psychological interventions, consultation, treatment coordination, supervision, and professional behavior.

The goal of the postdoctoral program is to help each fellow develop a strong sense of professional identity and a dedication to the highest standards of practice within the profession and science of psychology. All fellows are expected to develop skills in basic areas of clinical psychology in addition to specialized proficiencies associated with their tracks.

The postdoctoral fellowship program prepares our developing psychologists for competitive employment within areas of emphasis within VHA that are of need to adequately serve our nation's veteran population. Our method of training is characterized by an apprenticeship model wherein the fellow is treated as a junior colleague while working with a given population and professional team. Goals and training objectives are clearly and collaboratively communicated between the supervisor and supervisee, with increased oversight and supervision at the outset of the year and a gradual move towards greater autonomy by the supervisee. In contrast to interns, postdoctoral fellows do not rotate for brief periods of time in various areas of practice. Their focus, instead, is more in depth in their tracks of emphasis. During the training, it's our expectation that our fellows' levels of competence and confidence increase as the training year progresses. By the time the fellow finishes the year, he/she is expected to have learned and demonstrated all Core Competencies and to have a realistic sense of confidence in his/her abilities as a psychologist.

Diversity Mission Statement

The VA North Texas Healthcare System's Clinical Psychology Fellowship is deeply committed to fostering multicultural competence and diversity awareness. The overall goal of our training activities is to produce fellows that are sensitive to individual differences and demonstrate the ability to apply diversity-based models in clinical settings.

The Psychology Diversity Committee is comprised of VANTHCS psychologists who are committed to helping trainees, psychologists and other stakeholders develop the increased awareness, knowledge, and skills necessary for working with a highly diverse patient population. It also aims to explore how, as mental health professionals our biases, power, privilege, assumptions, and life experiences affect our clinical work. Interested fellows can serve as diversity committee members during their fellowship year. Student members are an integral part of the Diversity Committee and are encouraged to aid with planning as well as serve as a liaison with their cohort.

The Diversity Committee conducts a series of diversity journal clubs and reflective discussions to foster professional development. The diversity series includes diversity readings that aim to address a variety of topics relevant to specific patient populations and to the promotion of multicultural competence (e.g., cultural perceptions of psychotherapy and psychotherapists, spirituality, socioeconomic status, disability, LGBTQ Veterans, immigration/acclimation, aging, women's issues, etc.). Reflective discussions bring trainees and staff together to provide in-depth conversation on how to improve diversity in care. Lastly, the Diversity Committee assists trainees with their incorporation of diversity-based models into psychotherapy and assessment case conceptualizations.

The Dallas VA serves Veterans from a highly diverse area, encompassing urban and suburban communities around Dallas. Our heterogeneous setting gives fellows the opportunity to provide services to Veterans from a variety of backgrounds. Veterans in this area are ethnically diverse, providing trainees with the opportunity to develop competencies in working with patients from many different cultural backgrounds. Fellows have the opportunity to provide services to a variety of minority and underserved populations, which is vital to the training of well-rounded psychologists. The Dallas VA has an active homeless program, which coordinates health care, services, and advocacy for homeless Veterans. Lesbian, Gay, Bi-sexual, and Transgendered (LGBT) Veterans are increasingly seeking services at the Dallas VA, and the broader Dallas metropolitan area features an active LGBT community. In this context, fellows will be able to develop their appreciation for diversity in sexual orientation. Increasingly, the veteran population includes greater numbers of women, which presents more opportunities for fellows to develop skills for competently addressing sex and gender issues in their training. The Dallas VA provides services tailored to address the needs of Veterans across their lifespan, and fellows are offered opportunities to work in settings where age-related issues are relevant (e.g., younger Veterans setting education goals and re-integrating into their families after deployment, middle-aged Veterans adjusting to retirement and medical problems, elders facing end-of-life issues). Fellows will also be encouraged to explore other dimensions of diversity, including but not limited to, national origin, immigration status, language differences, religious/spiritual beliefs, and physical ability.

Training Goals and Objectives

Postdoctoral fellows have goals and objectives which are specified in the form of core competencies. The Core Competencies assessment system serves not only as an evaluative instrument but also as a training guide throughout the year.

The Core Competencies cover the following domains of practice:

- Psychological Assessment and Testing
- Psychotherapy and Other Psychological Interventions
- Professional Interactions and Ethics
- Consultation and Professional Behavior
- Cultural Diversity
- Professional Supervision
- Administrative and Professional Management Knowledge
- Scholarly Inquiry

Additional specialty-specific competencies are outlined in the respective program descriptions.

Core Competencies are rated on the basis of direct observation, discussion within supervision, assessment report review, progress note review, and a combination of these methods. The scoring system employs a range of scores denoting performance below, at, or above what is expected at the postdoctoral level. The evaluation follows a developmental model and allows progress to be evaluated and noted throughout the year, including behavioral anchors that guide each rating.

Program Structure

The postdoctoral program at VANTHCS, with the exception of the Neuropsychology fellowship, is a full-time, one-year program. The Neuropsychology fellowship is a two year, full-time program. Postdocs begin their training year on August 17th and all but the Neuropsychology emphasis fellows will finish their

training on the same date of the following year. There are no unpaid postdoctoral positions. There are also no part-time positions. The stipend is \$49,311 for the training year. Fellows also accrue Annual leave (vacation) and Sick Leave in increments per each of the 26 bi-weekly paychecks.

The postdoctoral fellowship program envisions its trainees as junior staff members albeit with a greater degree of supervision and educational components than would be available in a first year job. In addition to serving as members of interdisciplinary treatment teams and providing direct clinical care to patients, fellows attend bi-weekly topical didactic seminars and alternatively meet as a trainee cohort with faculty to present clinical cases. A Psychiatry Grand Rounds series is available weekly (via videoconference from our affiliated medical school, UT Southwestern Medical Center). A Mental Health Grand Rounds series hosted by our Mental Health Service occurs monthly. Psychology trainees are encouraged to attend these events geared toward continued education. In addition, time off (in the form of "Authorized Absence") is provided for attending conferences, approved local educational events/workshops, or other professional activities. Time off for other professional events may be granted if such events are related to the training being obtained and professional goals of the fellowship, such as taking the EPPP and other requirements to obtain licensure. Fellows receive a total of 5 days for "Authorized Absence" associated with training and professional goals. This is consistent with the amount of Authorized Absence staff receive annually for professional development.

Fellows are expected to work a 40-hour work week. They are not allowed to have patient contact when their supervising psychologist is not on duty; however, they may complete administrative tasks on station outside of the 40-hour week as needed. Supervision includes a minimum of two hours of face-to-face time per week and generally includes more time for "as needed" unscheduled supervision. In addition, postdoctoral fellows meet weekly with the Training Director and Assistant Training Director to discuss matters of professional development. Fellows may also gain experience in supervising either a doctoral Psychology intern or psychology practicum student. That supervision is in turn supervised by their licensed psychologist supervisor.

Regardless of Major Rotation, all fellows will participate in the following active learning experiences built in to the fellowship:

Experience	Frequency and Time Commitment
Cohort Development	1.5 hours weekly
Group Supervision	2 hours monthly
Quality Performance Review (QPR)	1 hour monthly
Diversity Journal Club	1 hour monthly
Fellowship Project	Self-Paced (~ 1 hour per week)
EBP	2-3 hours weekly (direct patient care) 1 hour weekly (supervision)
Rotation Supervision	2 hour weekly + PRN
Didactic	1 hour twice monthly
Management/Leadership Book Club	2 hours monthly (6 months)
EPPP Prep Time	2 hours monthly

Additional training opportunities and workshops are offered throughout the training year. Educational workshops promoting staff development are also open to trainees. Recent workshops have including 6-8 hour trainings on topics such as Motivational Interviewing/Enhancement, a Supervision Seminar Series, and Multiculturalism and Ethics from a DBT Perspective.

Program Requirements

Postdoctoral fellows are expected to learn and demonstrate all Core Competencies at “above entry-level” by the end of their training. Competencies are evaluated by the fellows’ supervisors in consultation with the Training Director and Postdoctoral Fellowship Training Committee.

Pursuit of Licensure

In addition, fellows are required to demonstrate active pursuit of licensure in the jurisdiction of their choice, evidenced by applying for licensure and taking the EPPP during their fellowship year. Completion of the fellowship is not contingent upon passing the EPPP; rather, this requirement is satisfied simply by sitting for the exam. This fellowship offers 2 hours/month of protected time for exam prep.

Clinical Investigation Project

Each fellow is required to complete a Clinical Investigation Project related to the improvement of clinical services. There are three options for the Fellow Clinical Investigation Project including Program Evaluation, a formal IRB-approved Research Project, or a Performance Improvement Project. Fellows are encouraged to find a project within their respective specialty that is of interest to them as well as relevant to their current clinical setting. All fellow projects are subject to approval by the Fellowship Training Committee, and fellows are expected to present the findings of their project to the Training Committee as well as one other professional group, such as the clinic where the project was completed or a professional meeting. Additionally, fellows complete a written report summarizing their project.

Therapy Training Independent of Emphasis Area

In addition to their primary assignment, each fellow is required to use 1 Evidence Based Psychotherapy (EBP) approach throughout the year. This element of training enhances and refines fellows’ psychotherapy skills by providing expert training and supervision in therapies that are supported by the latest research. Fellows receive in-depth clinical experience in their selected EBPs given their focus on one modality for the duration of the training year.

For this component of the fellowship experience, fellows are matched with supervisors who have expertise in these therapies. As noted, the supervisory relationships will last for the entire training year unless changes are requested. The EBP supervisor will select cases which will provide a good training experience for the fellow. Additional EBPs may be available within certain emphasis areas and can be selected for one’s EBP rotation if appropriate and consistent with the trainee’s professional goals.

Current EBP’s are:

1. Cognitive Behavior Therapy (for Depression)
2. Acceptance and Commitment Therapy (for Depression)
3. Interpersonal Therapy (for Depression)
4. Cognitive Processing Therapy (for PTSD)
5. Prolonged Exposure Therapy (for PTSD)
6. Interactive Behavioral Couples Therapy (Couples)

Fellows carry two psychotherapy cases within their selected EBP. Fellows are allotted time away from their primary placement to focus on their EBP. This includes time to see their therapy cases each week as well as an hour for weekly supervision with their EBP supervisor.

Facility and Training Resources

All fellows have a dedicated office which they may use for conducting psychological assessment, testing, and therapy, although other common clinical areas may also be utilized, such as bedside consultation, when clinical situations warrant such practices. A networked PC with a full range of software is provided. Psychological and Neuropsychological assessment tools are readily available as is adjunct supervision to use them when needed. The medical library is state of the art and prides itself in finding information and completing searches in an expeditious fashion. Clerical support is provided by Psychology Section of our Mental Health Service which has an administrative assistant.

Emphasis Areas within the Clinical Psychology Fellowship

The following emphasis areas are outlined below with attention to the various workload training requirements associated with each program:

- 1) Substance Abuse Fellowship (2 positions)
- 2) Lesbian-Gay-Bisexual-Transgender Fellowship (1 position)
- 3) Patient Aligned Care Team Fellowship (1 position)
- 4) Health Psychology Fellowship (1 position)
- 5) Post-Traumatic Stress Disorder Fellowship (2 positions)

Substance Abuse Emphasis

Overview

The substance abuse fellow is embedded in Mental Health Substance Abuse Services (Gold Team) clinical team. The fellow is one of three addiction fellows that work with the Gold Team. The fellow will be assigned a primary supervisor which will be one of the 5 staff psychologists within the team. The fellow's typical workday will reflect that of their supervisor, which would most likely be M-F 8-4:30.

The Mental Health Residential/Outpatient Addiction Team (Gold Team) is an interdisciplinary team that specializes in providing mental health care to veterans whose primary diagnoses involve substance abuse. The Gold Team is comprised of a 40 bed inpatient rehabilitation unit, an intensive outpatient program and an opioid replacement clinic. The fellow will provide assessment and treatment to veterans on this team at multiple levels of care. Most chemically dependent veterans also have co-occurring psychiatric disorders, such as affective disorders, anxiety disorders, psychotic disorders and personality disorders. Thus, the fellow will provide assessment and treatment for the full spectrum of mental health disorders. Within the residential rehabilitation program fellows may provide psycho-educational groups and process groups such as relapse prevention groups and seeking safety groups. Additionally, fellows will be assigned as primary clinician for veterans attending the rehabilitation program. The fellows will follow a veteran through the rehabilitation process including: assessment, individual therapy and treatment coordination services while coordinating these services with their interdisciplinary team. The Gold Team Interdisciplinary Team is comprised of psychiatrists, medical internist, psychologists, physician assistants, pharmacists, nurses, social workers, addiction therapists, occupational therapists, recreation therapists,

nursing assistants and chaplains. While working with the Interdisciplinary Treatment Team, the fellow will have the opportunity to coordinate the psychological services they provide with the other components of the veteran's treatment.

Training Opportunities

Specialty training opportunities:

- As an active member of an Interdisciplinary Treatment Team provide case management and psychological services for veterans attending an inpatient substance abuse rehabilitation program.
- Learn evidence-based interventions specific to veterans with substance abuse diagnoses such as contingency management and motivational interviewing
- Develop and maintain a psychotherapy group such as a pre-treatment group or mindfulness group (potentially to use as program evaluation component of the fellowship)
- Facilitate psycho-educational and process-oriented psychotherapy groups(such as seeking safety, stress management relapse prevention)
- Participation in EBP training
- Layered supervision of available trainees (either intern or practicum student)

Approximately 75% of the fellow's time will be spent in patient care related activities. These activities include:

- Direct patient contact
- Case management
- Documentation
- Providing layered clinical supervision (for interns or practicum students)
- Receiving clinical supervision
- Consultation with Interdisciplinary team members

In addition to the training activities for all fellows, trainees in the Substance Abuse track will also participate in the following activities:

Experience	Frequency and Time Commitment
Addiction Journal Club	1 hour every other week
SUD Didactic	1 hour every other week

Supervisory Staff

Dr. Michael Dolan is a licensed Psychologist in the state of Texas. He earned his Ph.D. in Clinical Psychology from the University of Kentucky in 1975. He has been on staff at VANTHCS since 1978, and currently works on the MH Gold team, focusing on the assessment and treatment of chronic substance use disorders, which is his primary clinical interest. His theoretical orientation is cognitive-behavioral. His research interests include the use of contingency contracting to decrease drug abuse, cocaine addiction, needle-sharing and AIDS education. He is a member of the American Psychological Association.

Dr. Meredith Shaw is a licensed Psychologist in the state of Texas. She received her Ph.D. in Clinical Psychology from the University of Maryland, Baltimore County in 2011. Dr. Shaw joined VANTHCS in 2011 and currently serves as a clinical director of the Mental Health Gold Team, the substance abuse specialty team. Her interests include treatment of depression, anxiety, substance-related disorders, trauma and stress-related disorders, chronic pain, and health behavior change. Her primary treatment approaches are

Cognitive Behavioral Therapy, Acceptance and Commitment Therapy, and Motivational Interviewing. She holds a faculty position as an Assistant Professor of Psychiatry at the University of Texas, Southwestern Medical Center (UTSW), and is involved with training medical students, residents, and fellows.

Dr. Jennifer B. Mayfield is a licensed Psychologist in the state of Iowa. She received her Ph.D. in Counseling Psychology from the University of Illinois at Urbana-Champaign in 2012. Dr. Mayfield completed a Postdoctoral fellowship at VANTHCS and joined the staff in 2013. She provides clinical services within the MH Gold Team. A member of the American Psychological Association, her clinical interests include substance abuse and comorbid disorders and treatment as well as evidence-based PTSD treatment. Her research interest is in contingency management. Dr. Mayfield's theoretical orientation is cognitive behavioral, interpersonal, uses multicultural counseling theory, and involves community reinforcement approaches to substance abuse treatment.

Lesbian-Gay-Bisexual-Transgender Health Care Emphasis

Overview

VA North Texas Health Care System was recognized as a Healthcare Equality Index (HEI) Top Performer in Lesbian-Gay-Bisexual-Transgender (LGBT) healthcare in 2019. This recognition is earned through protecting our LGBT patients and employees from discrimination, ensuring equal visitation, and providing staff training in LGBT patient-centered care. Our hospital is pleased to announce an opportunity in our APA-accredited Clinical Psychology Fellowship Program for a Postdoctoral Fellowship with an emphasis in LGBT Health Care for Veterans. The fellow would join VA North Texas' commitment to addressing the health care needs of LGBT Veterans and reducing health disparities for them and members of other vulnerable communities.

The training year for the LGBT fellow would involve a combination of medical and mental health settings. At least 60% of the training year will consist of clinical activities (direct services as well as program evaluation and/or needs assessment activities) and up to 40% of the training year will be spent in education and professional development activities. The Fellow will participate in the following assignments: a year-long major rotation on our Outpatient General Mental Health team (Mental Health Diamond Team). The Diamond Team is a Behavioral Health Integration Program (BHIP). The fellow would have a year-long minor rotation within our Primary Care Mental Health Integration clinic which may also include involvement with the Infectious Disease Clinic.

Supervisors: Dr. Gloria Emmett, Dr. Matthew Chester, Dr. LaDonna Saxon

The LGBT fellowship includes the following components:

Behavioral Health Integrated Program: The fellow will be a member of an interdisciplinary mental health team in the outpatient clinic. The fellow will have opportunities for collaboration and consultation with members of their team and will build skills in interprofessional work. The fellow will receive LGBT-focused referrals and clinical opportunities for individual and group therapy. Additionally, the LGBT Fellow will field general referrals from members of their respective mental health clinic or team. During the training year, the fellow will co-facilitate the LGBT Veteran Group and will have the opportunity to start other groups of interest. The LGBT Fellow will learn about Cross-Sex Hormone

Readiness Evaluations and, depending on the availability, will have the opportunity to conduct a readiness evaluation.

Primary Care Mental Health Integration (PCMHI): PCMHI provides co-located, collaborative consultation, assessment, and intervention services for Primary Care Patient Aligned Care Teams (PACT). PCMHI provides same-day, open-access behavioral health services via consultation with primary care providers. PCMHI providers enact targeted evaluation and brief treatment for patients with broad ranging clinical presentations such as depression, anxiety, PTSD, substance use, chronic medical conditions, pain, adjustment to life changes, grief, caregiver support, and relationship concerns. Additional areas of clinical attention include addressing internalized stigma, discrimination, and disclosure/coming out. While the majority of interventions are short-term and solution-focused in nature, treatment is individually tailored to support the needs and preferences of the care recipient(s). As available, the LGBT Fellow may also collaborate with the PCMHI Supervising Psychologist to implement LGBT education services to primary care staff.

Infectious Disease Clinic: The Infectious Diseases Clinic is where HIV is treated and Pre-Exposure Prophylaxis Treatment (PrEP) is provided. The fellow will have opportunity to participate in the Thursday morning screening clinic during which the fellow will collaborate with physicians, nurses, and clinical pharmacists in the provision of care. The care model is similar to PCMHI in that the fellow will be available to receive warm hand-offs from ID clinic staff for Veterans seeking support. While adjustment to diagnosis is a common concern, the fellow may also be providing care for a range of concerns seen in the PCMHI setting, with case supervision provided by their PCMHI supervisor.

Outreach: The fellow will have the opportunity to participate in varied hospital committees that will enable the fellow to be aware of the various outreach activities, disseminate information regarding LGBT services, address consultation needs across the hospital, and to target activities throughout the year to LGBT Veterans. These committees may include the Sexual Orientation and Gender Diversity Committee, the Health Promotion & Disease Prevention Committee, and the facility's Diversity Advisory Group committee.

Learning Objectives for LGBT Interprofessional Care:

- Knowledge of mental healthcare needs of Veterans.
- Knowledge of mental healthcare needs of sexual minorities and transgender Veterans.
- Knowledge of gender dysphoria assessment and evaluations of readiness for cross-sex hormone treatment.
- Ability to coordinate mental health treatment within an interprofessional team.
- Skill in providing education and process-approach group therapy to LGBT Veterans.
- Skill in providing education to other providers about working with LGBT Veterans.
- Skill in delivering outreach to LGBT communities within our catchment area.
- Proficiency in delivering mental health treatments to Veterans with comorbid mental health and substance use disorders as well as chronic health conditions.
- Proficiency in carrying out research and program development focused on the provision of care to LGBT Veterans.
- Build awareness of their own countertransference when working with LGBT Veterans.
- Develop skills on the assessment and treatment of co-occurring concerns with LGBT Veterans.
- Build skill at advocating for LGBT Veterans within their various systems.
- Ability to use VA resources (particularly SharePoint sites and CPRS consult system) to meet the needs of Veterans.
- Develop familiarity with the local and national VA policies related to LGBT Veterans.

Training Opportunities

- Observe gender dysphoria diagnostic assessment.
- Observe for readiness of cross-sex hormone interviews.
- Facilitate groups for LGBT Veterans.
- Provide short or longer-term identity affirming therapy for LGBT Veterans through outpatient mental health.
- Provide outreach to LGBT Veteran communities.
- Provide education via one or more presentations to mental health staff.
- Participate on interprofessional teams.
- Assume select administrative duties for the LGBT Services consult system.
- Program development and/or research activities focused on LGBT Veteran health.
- Assist in planning and coordinating outreach events that coincide with LGBT Pride, LGBT History Month, and other recognition periods, either on-campus or with Veterans in the community.

Approximately 60% of the LGBT psychology fellow's time will be spent in patient care related activities.

These activities include:

- Direct patient contact
- Case management
- Documentation
- Providing layered clinical supervision, as available (for interns or practicum students)
- Receiving clinical supervision
- Consultation with Interdisciplinary team members

Experience	Frequency and Time Commitment
LGBT Issues Journal Club	1 hour per month
MH Diamond Interdisciplinary Team Meeting	1 hour per week
BHIP Huddle Meeting	1 hour per week
PCMHI Team Meeting	1 hour every week
Sexual Orientation and Gender Diversity Committee	1 hour every month
Health Promotion & Disease Prevention Committee	1 hour every month (optional)
Diversity Advisory Group	1 hour every month (optional)

Supervisory Staff

Dr. Gloria Emmett is board certified in Clinical Psychology (ABPP), licensed in the state of Texas. She earned her Ph.D. from the University of North Texas in 2000, after completing her Predoctoral internship at VANTHCS. She has been on staff since that time and currently works within the MH Diamond Team, the largest general MH team in this health care system. Dr. Emmett is an Associate Professor in the department of Psychiatry at University of Texas Southwestern Medical Center. Her

clinical interests include PTSD (including sexual and childhood trauma), grief and loss, individual and group psychotherapy, including Dialectical Behavior Therapy (DBT) groups, and working specifically with LGBT Veterans across the age span. Her theoretical orientation is Contextual Behavioral (ACT), with mindfulness and applied ethics as core skills. She is a member of the Association for Contextual Behavioral Sciences, provides ongoing ACT training/consultation services, and is committed to maintaining lifelong learning and cultural humility.

Dr. LaDonna Saxon is a licensed Psychologist in the state of Kansas. She received her Ph.D. in Clinical Health Psychology and Behavioral Medicine from the University of North Texas in 2008 and completed a fellowship in Chronic Pain Rehabilitation at James A Haley VAMC in Tampa, FL. She joined VANTHCS in 2012 and serves as Health Behavior Coordinator and Tobacco Cessation Lead Clinician. She holds a faculty appointment as an Assistant Professor in the department of Psychiatry at University of Texas Southwestern Medical Center. Her research interests involve health promotion/health maintenance and coping with chronic health conditions. Her clinical interests include motivational interviewing, mindfulness, response to injury/disability, health coaching, and health promotion/disease prevention. Dr. Saxon's theoretical orientation is cognitive behavioral and humanistic. She is a member of the Motivational Interviewing Network of Trainers, the Institute for Meditation and Psychotherapy, and the American Congress of Rehabilitation Medicine (ACRM).

Dr. Matthew Chester is a licensed Psychologist in the state of Texas. He earned his Ph.D. in Counseling Psychology from The University of Texas at Austin in 2018 after completing his predoctoral internship at Duke University Counseling and Psychological Services. He completed a Patient Aligned Care Team (PACT) Postdoctoral Fellowship at VANTHCS. Dr. Chester currently serves as a member of the Primary Care Mental Health Integration Team. His research interests include LGBT health and wellness, with special emphasis on gay men and masculinities. His clinical interests include brief therapeutic interventions, LGBTQ issues, gender identity and its expression, race and cultural diversity, and mindfulness/meditation. Dr. Chester's theoretical orientation is humanistic and multicultural.

Patient Aligned Care Team (PACT) Emphasis

Overview

The PACT fellow is embedded within the Patient Aligned Care Teams. Primary supervision is provided by LaDonna Saxon, PhD. Dr. Saxon is the Health Behavior Coordinator & Tobacco Cessation Lead Clinician for the VA North Texas Health Care System (VANTHCS). The fellow's typical workday will reflect that of Dr. Saxon, which is M-F 7am – 3:30pm. The rotation heavily emphasizes the use of EBPs, and trainees typically receive supervision in 3 different evidence based therapy approaches/protocols within the PACT training fellowship in addition to the EBP selected from the list on page 10.

The PACT fellow will support the functioning of PACT teams through consultation, direct patient care, and staff training. These services include completing brief mental health screenings consistent with the 30-minute Primary Care appointment slot, as well as completing more lengthy clinical assessments to facilitate veteran assignment to mental health teams for longer-term care. The fellow will also deliver brief interventions consistent with 30-minute Primary Care appointment slots. Interventions within the Primary Care setting are time-limited (generally 5 sessions or less). They typically target improving client coping with life stressors or medical conditions, as well as increasing medical or mental health treatment engagement. While not typical of all Primary Care Mental Health Integration (PCMHI) settings, the VANTHCS fellow receives supervision in the delivery of Cognitive Behavioral Therapy for Chronic Pain

(CBT-CP) and Cognitive Behavioral Therapy for Insomnia (CBT-I), as these are areas of needed support for veterans seen by PACT teams.

The PACT fellow will also support PACT team patients through health promotion activities, such as managing tobacco cessation consults, providing individual and group tobacco cessation treatment, and leading psychoeducational classes on weight management (MOVE!). The 2018-2019 fellow will spend ½ day weekly providing services to Veterans who identify as LGBT, which will include co-facilitation of LGBT support groups. Prior fellows currently spent ½ day weekly in the Endocrinology clinic providing brief motivational interviewing to patients who are experiencing difficulty adhering to complex diabetic regimens, facilitating bariatric surgery support groups, weight management support groups, coping with limb loss support groups and/or shared medical visits for hypertension and diabetes. The availability of these activities has varied from year to year, based on clinical need and trainee interest.

The PACT fellow is expected to also assist PACT teams by coaching staff in core skills related to Motivational Interviewing (MI) and/or Health Coaching. Clinician coaching will only be allowed after the fellow has demonstrated proficiency in core MI components. In particular, the fellow will be expected at a minimum to embody the spirit of Motivational Interviewing during client encounters, as well as preferentially use open over closed questions, use reflections more than questions, and use complex more than simple reflections to elicit client change talk and manage discord. The trainee will submit audio recordings of client encounters for competency coding by the primary supervisor. Dr. Saxon is a MI/MET master trainer within VHA and will provide training, support materials, and supervision in these modalities for the fellow.

Training Opportunities

Approximately 65% of the fellow's time will be spent in patient care related activities. These activities include:

- Consult management
- Direct patient contact
- Documentation
- Providing layered clinical supervision (for interns or practicum students)
- Receiving clinical supervision

In addition to the training activities for all fellows, trainees in the PACT fellow will also participate in the following activities:

Experience	Frequency and Time Commitment
PCMHI Team Meetings	1 hour weekly

Optional:

- **National PAIN Community of Practice calls** – offered monthly throughout year. Fellow may attend calls relevant to brief intervention, PACT, interdisciplinary work in the context of pain management.
- **National PACT Community of Practice calls** – offered monthly throughout year. Fellow may attend calls relevant to brief intervention, interdisciplinary work. Not all calls are relevant topics for psychology as they are more focused on core PACT providers (RN, LVNs, PCPs).
- **National CBT-I case conference calls** - occur monthly. Fellow may schedule time for these depending upon interest and progress learning CBT-I.

- **National CBOC Grand Rounds** – occur monthly. Topics have included Mindfulness, Post-traumatic growth, Grief, Opioid Overdose Education, and Motivational Interviewing informed interventions. Generally, topics for the mental health clinician in a CBOC who is expected to be a Jack/Jill of all trades, as is often the case in PCMH.
- **Regional and National Tobacco Cessation conference calls** – bi-monthly
- **Local LGBT Veteran Care Committee meetings** – monthly
- **Local Sleep Medicine Case Conference** - varies

Other:

Since 2014 most PACT Fellows have completed both the 2-hour White Belt Lean Six Sigma training as well as the two day Yellow-Belt Lean Six Sigma training to promote their understanding of program evaluation and systems redesign

Supervisory Staff

Dr. LaDonna Saxon is a licensed Psychologist in the state of Kansas. She received her Ph.D. in Clinical Health Psychology and Behavioral Medicine from the University of North Texas in 2008 and completed a fellowship in Chronic Pain Rehabilitation at James A Haley VAMC in Tampa, FL. She joined VANTHCS in 2012 and serves as Health Behavior Coordinator and Tobacco Cessation Lead Clinician. She holds a faculty appointment as an Assistant Professor in the department of Psychiatry at University of Texas Southwestern Medical Center. Her research interests involve health promotion/health maintenance and coping with chronic health conditions. Her clinical interests include motivational interviewing, mindfulness, response to injury/disability, health coaching, and health promotion/disease prevention. Dr. Saxon's theoretical orientation is cognitive behavioral and humanistic. She is a member of the Motivational Interviewing Network of Trainers, the Institute for Meditation and Psychotherapy, and the American Congress of Rehabilitation Medicine (ACRM).

Health & Rehabilitation Psychology Emphasis

The Health & Rehabilitation Psychology Fellowship is split between two 6-month rotations. Fellows complete two health-focused rotations including: Spinal Cord Injury (SCI) and Community Living Center (CLC). Additionally, a minor rotation within our Pain Clinic is also available.

Spinal Cord Injury (SCI)

The Spinal Cord Injury Center (SCIC) includes a 30-bed inpatient unit to care for the medical and rehabilitation needs of persons with spinal cord injuries or other neurological dysfunctions (e.g., multiple sclerosis, Guillain-Barre Syndrome, and cervical myelopathy) as well as an outpatient clinic for comprehensive care throughout the lifespan. The SCIC operates a CARF-accredited rehabilitation program for spinal cord injury with 8 beds designated for this program. The clinical mission of the Spinal Cord Injury Center is to enhance the health, functional abilities and quality of life for persons with spinal cord injury or disease. Psychology is an integral part of the interdisciplinary team that works together toward this stated goal. Other members of the team include: physicians, nurses, social workers, occupational therapists, physical therapists, kinesiotherapist, recreational therapists, chaplains, and dietitians.

The overarching goal of the rotation will be applying clinical skills to help individuals achieve optimal psychological, behavioral, and social functioning. To accomplish this task, the fellow will master strategies for functioning effectively in a dynamic inpatient medical unit and as a member of the interdisciplinary

team. Patients served at the SCI Center comprise a diverse population in terms of ages (19-98), disabilities, medical conditions, education (4th grade through Ph.D. level), occupations, family support, and psychiatric diagnosis. Fellows working on this unit will increase their comfort level working with individuals with disabilities and gain an exposure to a vast array of medical conditions. Fellows will conduct comprehensive assessments of an individual's coping status and adaptation to chronic illness and disability in the context of personality, cognitive status, as well as family and social systems in order to implement an appropriate treatment plan.

Common rotation goals/areas of skill development:

- Developing skills in working closely with a large interdisciplinary treatment team
- Clarifying and responding to referral questions
- Developing behavior management plans for staff to utilize
- Formulating appropriate assessment batteries with accommodation for disability status
- Presenting treatment recommendations
- Providing psychotherapy within a rehabilitation psychology context

Treatment/Intervention:

- Individual psychotherapy
- Psychoeducation for family/couples
- Interventions for adjustment to disability
- Consultation to other health care providers and the interdisciplinary team
- Collaborative treatment planning with other team members
- Managing "difficult" patients in an inpatient setting
- Negotiating difficulties between patients and inpatient staff

Common issues faced by patients:

- Difficulties in coping with chronic illnesses/disabilities/stress
- Cognitive deficits secondary to traumatic brain injury, dementia, etc.
- Sexual dysfunction
- Vocational changes
- Grief reactions
- Family/relationship problems
- Chronic pain
- Substance use

The Health Psychology Fellow will demonstrate program development and evaluation skills by designing and implementing a program and then evaluating its results. The Fellow will be closely involved in the process of determining the appropriate provision of psychological services for Veterans on the SCI Unit. This involvement will include, but not be limited to the following:

- Assigning newly-admitted Veterans to a practicum student, intern or psychologist for the initial screening evaluation or conducting the evaluation in the absence or unavailability of other staff.
- Providing weekly supervision of the intern or practicum student on the SCI rotation, including choice of assessment measures, competency of test administration, report writing, and provision of feedback to Veterans and/or family members.
- Assisting in determining Veterans' needs for ongoing psychotherapy or behavioral intervention, and determining which staff member (fellow, intern, practicum student, or staff psychologist) will address these issues. The Fellow will assist in determining caseloads for the intern and practicum student at any given time.

Community Living Center (CLC)

The CLC is a 121-bed inpatient unit comprised of hospice/palliative care, long-term care, medical/surgical, and rehabilitation beds, including 6 CARF-accredited Comprehensive Integrated Inpatient Rehabilitation Program (CIIRP) beds. The CLC inpatient population includes Veterans who are admitted for rehabilitation due to stroke, traumatic brain injury, amputation, debility, deconditioning, and various medical conditions, as well as those who are receiving wound care, or who are admitted for hospice care. The trainee's role will involve both that of clinician and as a consultant to the interdisciplinary teams, including neuropsychological evaluation, consult liaison services, evaluation and management of psychological issues and behavioral problems, individual and family psychotherapy, staff development interventions and training, program development and supervision of practicum students and psychology interns (when available).

Assessment of Veterans in the CLC involves evaluation of cognitive functioning and mood, including decision-making capacity; determining both pathological and non-pathological changes in functioning associated with "normal aging"; recognition of the role of acute health problems, chronic and/or terminal illness and disability in the older adult population. Consultation within the interdisciplinary team context of an inpatient setting allows the Fellow to develop autonomy and professional identity while also providing Health Psychology's perspective on the Veteran's functioning.

Interventions at the CLC include:

- providing co-treatment with physical therapy and/or occupational therapy
- providing counseling and support to Veterans with moderate to severe disability in the context of rehabilitation and the potential for loss of function,
- providing brief psychotherapy and behavioral health interventions
- developing interventions for pain management, addressing tobacco cessation, and encouraging adherence to treatment recommendations.
- within the hospice unit, the trainee will offer support to terminally ill Veterans and their family members, as well as the professional staff who provide their care, including end of life issues (suffering, grief, bereavement), symptom management as needed for pain, depression, or anxiety, and may include psychoeducational groups for Veterans, families and staff.

Behavioral Health Consultation – Pain (minor rotation)

Activities within this clinic include provision of consultation-liaison service and participation in ongoing treatment programs for selected medical patient populations. Activities would also include assessment and intervention with chronic pain; education/support groups for patients with chronic health problems; stress management, and relaxation training. There are opportunities for training and staff development with medical treatment team staff (e.g., nurses, residents), for experience in multidisciplinary treatment approaches, and in treatment/program outcome data collection and assessment.

Fellows would develop a working knowledge of relevant medical terminology and with those medical disorders which are strongly linked to psychological functioning ("mind-body" connections). They would also gain experience with the specific types of psychological issues and problems that result from a variety of medical illnesses and conditions. As part of the above, fellows will learn the necessary techniques involved in interviewing and testing medical patients, and incorporating existing psychological interviewing skills as well as the skills unique to interviewing medical patients. Fellows will learn to write reports that communicate findings in a manner which both describes problems clearly and in which solutions or a treatment course are offered or recommended. In addition, fellows will learn to screen

medical records for relevant psychological information, and finally, to educate physicians and allied health care personnel about the role of a psychologist in a medical setting.

Fellows within this rotation may also have opportunities to work within our Chronic Pain Rehabilitation Program. The Chronic Pain Rehabilitation Program (CPRP) is one component of the chronic pain treatment services at the North Texas VA. The CPRP is unique in its interdisciplinary origins and administration, and is the only CARF-accredited pain program in VISN 17. Pain staff members operate an outpatient screening and treatment program that provides tertiary level chronic pain care in a collaborative multidisciplinary team.

The Health & Rehabilitation Psychology Fellow will demonstrate program development and evaluation by designing and implementing a program or a change in a program and evaluating its results. The Fellow will be involved in the process of determining the appropriate provision of psychological services for Veterans at the CLC. This involvement will include, but will not be limited to the following:

- Assigning newly admitted Veterans to an intern, practicum student, or psychologist for the initial screening evaluation or providing the evaluation in the absence or unavailability of other staff.
- Providing weekly supervision of the intern or practicum student on the CLC rotation, including choice of assessment measures, competency of test administration, report writing, and giving feedback to Veterans and/or family members.
- Assisting in determining Veterans' need for ongoing psychotherapy or behavioral intervention, and determining which staff member (fellow, intern, practicum student, or staff psychologist) will address these issues. The Fellow will assist in determining how many Veterans the intern and practicum student will follow at any given time. The Fellow will be responsible for providing leadership for these tasks.
- Assisting in disposition of referrals for family intervention.

Approximately 50% of the health psychology fellow's time will be spent in patient care related activities.

These activities include:

- Direct patient contact
- Case management
- Documentation
- Providing layered clinical supervision (for interns or practicum students)
- Receiving clinical supervision
- Consultation with Interdisciplinary team members

Approximately 50% time will be spent in training activities. Such activities include:

- Postdoctoral didactics (2 hrs/month)
- Health Psychology Consultation (1hr/week)
- Cohort development (1 hr/week)
- Neuropsychology Group Supervision (1hr/week - optional)
- Neuropsychology Journal Club (1hr/week - optional)
- Quality Practice Review (QPR) meetings (1 hr/month)
- Diversity Journal Club (1 hr/month)
- Research / Program Evaluation Project(s) (1 hr/week)
- Staff training (varies)

Experience	Frequency and Time Commitment
Health Psychology Consultation	1 hour per week
Neuropsychology Group Supervision	1 hour per week
Neuropsychology Journal Club	1 hour per week

Supervisory Staff

Dr. Helen Chung received her Ph.D. in Counseling Psychology from Oklahoma State University in 2014. She completed her Predoctoral internship in medical/health psychology and Postdoctoral fellowship in geropsychology at VANTHCS. She has been on staff since 2015, first in the Spinal Cord Injury Center and recently moved to the Community Living Center (CLC). Her clinical and research interests include rehabilitation, adjustment to disability, coping with chronic medical conditions, health psychology (e.g. diabetes/weight management), and geropsychology. Her theoretical orientation is primarily cognitive behavioral and solution-focused. She is a member of the American Psychological Association – Divisions 20, 22, 38, and the Academy of SCI Professionals.

Dr. Rebecca A. Frontera received her Psy.D. in Clinical Psychology from the Adler School of Professional Psychology in 2011. She completed a Doctoral internship at Mount Sinai Medical Center within the department of Rehabilitation Medicine in New York, NY and completed a Postdoctoral fellowship in Rehabilitation Psychology at the James A. Haley VAMC in Tampa, FL. Dr. Frontera joined VANTHCS in 2013 and works within the Spinal Cord Injury Center. Her research interests include adjustment to disability, disability and sexuality, limb amputation, and resiliency. Dr. Frontera's clinical interests involve rehabilitation of spinal cord injury (SCI) and traumatic brain injury (TBI), adjustment to disability, multiple sclerosis, ALS, disability and sexuality, and coping with chronic medical conditions. Her theoretical orientation is eclectic with cognitive behavioral, solution-focused, and person-centered. She is a member of the American Psychological Association - Divisions 22 and the Academy of SCI Professionals.

Dr. Mallory Lamb is a licensed Psychologist in the state of Texas. She earned her Psy.D. in Clinical Psychology from Wheaton College in 2016. She completed her pre-doctoral internship at the Greater Hartford Clinical Psychology Internship Consortium (VA Connecticut and UConn School of Medicine). She completed her post-doctoral fellowship in geropsychology at Dallas VA. She joined staff in 2017 and serves as the psychologist for long-term residential care and inpatient hospice within the Community Living Center (CLC). Her clinical and research interests include aging, adjustment to life transitions, nonpharmacological management of dementia-related behaviors, caregiver stress, grief and bereavement, and spirituality. Her theoretical orientation is primarily cognitive behavioral and solution-focused.

Dr. Tara Luchkiw Rosema is a licensed Psychologist in the state of Michigan. She earned her Ph.D. in Clinical Psychology from the University of Mississippi in 2016. She completed her predoctoral internship in health psychology and postdoctoral fellowship in interprofessional team-based care at the Cincinnati VA Medical Center. On both internship and fellowship, she completed rotations in organizational health at the National Center for Organization Development (NCOD). She currently serves as a psychologist in the Spinal Cord Injury Center. Her clinical interests include promotion and maintenance of health and wellness behaviors utilizing coaching skills, behavioral and cognitive behavioral therapy, Motivational Interviewing, and Acceptance and Commitment Therapy. She has a particular interest in interventions to improve organizational systems including team assessment, culture change initiatives, leadership

coaching, team-building, change management efforts, consultation, and program development/evaluation. Her theoretical orientation is primarily contextual behavioral.

Dr. Emma Shapiro earned a Ph.D. in Clinical Psychology with an emphasis in Neuropsychology from Palo Alto University in 2016. She completed a Predoctoral Internship at the Battle Creek VA in Michigan, and a two-year Neuropsychology Fellowship at the North Texas VA Health Care System. Dr. Shapiro joined the staff as a Neuropsychologist on the Spinal Cord Injury unit upon completion of her Neuropsychology Fellowship in 2018. Her clinical and research interests include PTSD, dementia, MS, and movement disorders. Dr. Shapiro's theoretical orientation is cognitive-behavioral.

Post-Traumatic Stress Disorder (PTSD) Emphasis

Overview

There are two PTSD fellow positions. Both positions are embedded in Mental Health Trauma Services (MHTS) clinical team. However, a fellow with strong interest in PTSD/SUD can elect to gain increased experience in this area by working within the residential or outpatient addiction team for 6 months of the fellowship. Primary supervision will be provided by one of the 10 staff psychologists within the PTSD or SUD team. The MHTS team is an interdisciplinary team comprised of 4 psychiatrists, 10 psychologists, 3 social workers, and 1 nurse practitioner. It should be noted that MHTS is comprised of numerous supervisors with proficient and advanced skills in implementing EBPs such as Cognitive Processing Therapy (CPT), Prolonged Exposure (PE) therapy, Acceptance and Commitment Therapy (ACT) for depression, and Integrative Behavioral Couples Therapy. As such, the fellow would have opportunities to utilize and enhance their skills in the delivery of these therapies as well as others as appropriate. The fellow's typical workday will reflect that of their supervisor, which would most likely be M-F 8-4:30.

The MHTS team is comprised of 4 sub-team specialty areas including the OEF/OIF/OND team, PTSD Clinical team, PTSD/SUD team, and the Women's Stress Disorder/Military Sexual Trauma team. The fellow will work primarily with one supervisor based on the fellow's training goals with opportunities to see veterans on other sub-teams during the training year as well.

A percentage of time will also be spent providing TeleMental Health (TMH) services (likely 4 hours/week).

OEF/OIF/OND Team

The OEF/OIF/OND Team has been treating patients from the Afghanistan and Iraq wars since 2007. Their primary focus is the treatment of mental health problems such as PTSD, depression, and anxiety. The patient population from these wars requires a specialized focus on the unique problems faced by this cohort. Clinical services include: diagnostic evaluation; group therapy, and individual treatment; case management; education; psychological testing; and psychopharmacological assessment and management. This rotation includes opportunities for trainees to learn and be supervised in delivery of any of the following EBPs: Imagery Rehearsal Therapy for Nightmares, Prolonged Exposure Therapy, Cognitive Processing Therapy and/or Integrative Behavioral Couple Therapy.

PTSD/SUD Team

The primary focus of this rotation is the assessment and treatment of veterans with comorbid PTSD and substance use disorders in an outpatient clinic (as part of an interdisciplinary MH treatment team). The patient population is comprised of male and female veterans from all war eras, with male OEF/OIF/OND being the most common. PTSD/SUD patients often have complex histories and symptom presentations, which gives trainees the opportunity to refine differential diagnosis skills and gain experience with treatment planning that best meets the patient's needs/readiness level and stage of recovery. Trainees will gain exposure to therapeutic techniques relevant to this subpopulation (e.g., motivational enhancement, behavioral modification/activation, CBT for alcohol use disorders), Seeking Safety, EBP for PTSD (CPT, PE) as well as present-centered, time-limited therapy geared toward developing coping skills for anxiety management, PTSD and sobriety maintenance/relapse prevention. Trainees will gain experience with assessment, including comprehensive PTSD intake evaluations, and opportunities for assessment of symptom validity and malingering.

A PTSD fellow with a strong interest in PTSD/SUD could also elect to gain increased experience in this area by working within the residential or outpatient addiction team for 6 months of the fellowship. The Mental Health Residential/Outpatient Addiction Team (Gold Team) is an interdisciplinary team that specializes in providing mental health care to veterans whose primary diagnoses involve substance abuse. The Gold Team is comprised of a 40 bed inpatient rehabilitation unit, an intensive outpatient program and an opioid replacement clinic. The fellow would provide assessment and treatment to veterans with comorbid PTSD and SUD diagnoses on this team at multiple levels of care.

PTSD Clinical Team (PCT)

The PTSD Clinical Team (PCT) has been in continuous operation since its inception in January, 1987. It is staffed by psychologists, a social worker, and a psychiatrist. Clinical services include diagnostic evaluation; group, individual and couples treatment; education; psychological testing; and psychopharmacological assessment and management. PCT services may be time-limited or open-ended, depending on the specific needs of the veteran. Group therapies offered to veterans include both ongoing support groups as well as time-limited groups, including psychoeducational groups as well as ACT groups. Individual therapies include supportive psychotherapy, and evidence-based therapies such as Prolonged Exposure Therapy, Cognitive Processing Therapy (CPT) and Acceptance and Commitment (ACT) Therapy. PCT services may be time limited or open-ended, depending on the specific needs of the veteran.

Women's Stress Disorder and Military Sexual Trauma Program (WSD-MST)

The Women's Stress Disorder and Military Sexual Trauma Program (WSD-MST) is a program that provides outpatient mental services to male and female Veterans who have experienced a Military Sexual Trauma (MST), and female Veterans with childhood, adult civilian and combat trauma histories.

The term Military Sexual Trauma (MST) is defined by Federal law (Title 38 U.S. Code 1720D) and is "psychological trauma, which in the judgment of a VA mental health professional, resulted from a physical assault of a sexual nature, battery of a sexual nature, or sexual harassment which occurred while the Veteran was serving on active duty, active duty for training, or inactive duty training." Sexual harassment is further defined as "repeated, unsolicited verbal or physical contact of a sexual nature which is threatening in character."

The VA is committed to treating Any Veteran who had an experience of sexual assault or repeated, threatening sexual harassment during a period of active duty, active duty for training, and inactive duty for training. The Veteran does not have to be service connected for a mental health condition secondary to MST or have reported the MST while in the military in order to receive MST-related care through the VA. Also, Veterans who do not meet length of active duty requirements for general enrollment in VA health care are still eligible to receive care only for MST-related conditions. Veterans with an Other than Honorable discharge may receive MST-related care if a VBA Regional Office rules that the character of discharge is not a bar to health care benefits. Both women and men can experience MST and are eligible to receive services.

The outpatient mental services offered in the WSD&MST program include evidence-based individual psychotherapies such as Prolonged Exposure (PE), Cognitive-Processing Therapy (CPT), Acceptance and Commitment Therapy (ACT), Cognitive-Behavioral Therapy for Depression (CBT-D), and Dialectical Behavior Therapy (DBT). Treatment is individually tailored for each Veteran after a thorough psychological evaluation that includes objective, standardized interviews and psychometrically valid measures of psychopathology and distress. The WSD-MST Team offers three types of therapy groups: structured/didactic (psychoeducational, skills-based, and support). Pharmacotherapy is also offered via a psychiatrist assigned to the program. Opportunities to learn about assessment, clinical treatment, and research with this specialty population are available to fellows.

TeleMental Health (TMH) Team

Technology is expanding the ways in which VA psychologists may reach out to Veterans with mental health needs. The TeleMental Health (TMH) program provides outpatient mental health care to Veterans served in rural Texas VA community-based outpatient clinics (CBOCs) located in Bridgeport, Denton, Greenville, Sherman, and Tyler. The program aims to increase patient access to specialty mental health care in rural and underserved areas, and to reduce the number of miles that patients must travel to receive mental health services. Using secure videoconferencing technology, the TMH service connects mental health providers to clinics that require additional mental health services for their patients, including consultation, initial patient assessments, individual psychotherapy, group psychotherapy, and specialized interventions (e.g., evidence-based therapies). The TMH provider collaborates with the patient's other local VA providers to ensure quality comprehensive care. Because the TMH program serves an array of different clients with variable clinical needs, the placement may align with a diversity of training goals. Commonly requested services include Cognitive Processing Therapy, Prolonged Exposure, Cognitive Behavioral Therapy, and Integrative Behavioral Couples Therapy. Emphasis is placed on the provision of empirically supported treatments. In addition to these clinical opportunities, fellows have the option of contributing to several ongoing quality improvement and research projects. Fellows will receive training in the technology used in telemental health, as well as specialized clinical and programmatic considerations for this mechanism of service delivery.

Training Opportunities

Specialty training opportunities:

- Develop and maintain a psychotherapy group such as a trauma-related guilt/moral injury group with Chaplain Fellow (potentially to use as program evaluation component of postdoc)
- Facilitate CPT groups (potentially both TMH and an in-house MHTS group)

- DBT group involvement all year (per training goals)
- Participation in EBP consultation group within MHTS
- Layered supervision of available trainees (either intern or practicum student, depending on licensed supervisor availability and interest in supervising supervision)

Approximately 75% of the fellow's time will be spent in patient care related activities. These activities include:

- Direct patient contact
- Documentation
- Providing layered clinical supervision (for interns or practicum students)
- Receiving clinical supervision
- Consultation with interdisciplinary team members

Experience	Frequency and Time Commitment
PE/CPT Consultation Meeting	1 hour per week
O/O/O-PCT Interdisciplinary Team Meeting	1 hour per week
WSD-MST Interdisciplinary Team Meeting	1 hour per week
Addiction Journal Club (optional)	1 hour every other week
SUD Didactic (optional)	1 hour every other week

Supervisory Staff

Dr. John Black is a licensed Psychologist in the state of Texas. He earned his Ph.D. in Clinical Psychology from the University of North Carolina at Greensboro in 1978. He has been on staff at VANTHCS since 1982 and currently serves as staff psychologist on the PTSD Clinical Team. Dr. Black's clinical interests are PTSD and EMDR, with research interests of drug abuse treatment and PTSD. His theoretical orientation is behavioral. Dr. Black is a member of the American Psychological Association, Association for Behavioral and Cognitive Therapies, and the EMDR International Association.

Dr. Lindsey Cooper is a licensed psychologist in the state of Kansas. She received her Psy.D. in Clinical Psychology from The Chicago School of Professional Psychology in 2015. She completed both her pre-doctoral internship and her post-doctoral fellowship at the Dallas VA. She currently serves as the PTSD/SUD specialist on the Trauma Services Team. Her clinical interests include treatment of PTSD, substance use disorders, symptom validity assessment, personality disorders, Cognitive Processing Therapy, Motivational Interviewing, Dialectical Behavior Therapy and Prolonged Exposure Therapy. Dr. Cooper's research interests include severe mental illness, dual diagnosis of substance abuse and mental illness, and PTSD in returning Veterans.

Dr. Anushka Pai is a licensed Psychologist in the state of Texas. She earned her Ph.D. in Clinical Psychology from the University of Texas at Austin in 2011. Dr. Pai joined VANTHCS in 2015. She provides clinical services within MH trauma services, on the Military Sexual Trauma/Women's Stress Disorder and OEF/OIF/OND teams. She is a member of the American Psychological Association. Her theoretical orientation is cognitive-behavioral, and her research interests include the treatment of PTSD and anxiety disorders.

Dr. Julia Smith is the Assistant Director of Training for the psychology programs and Clinical Director of MH Trauma Services. She is a licensed psychologist in the states of Texas and Kansas. She received her Psy.D. in Clinical Psychology from the Illinois School of Professional Psychology (ISPP) in 2008. She completed her Postdoctoral fellowship at VANTHCS (2008-2009), and has been on staff since that time. Dr. Smith also serves as a staff psychologist within the MH Trauma Services Clinic as the PTSD/Substance Use Disorder (SUD) Specialist. Dr. Smith is an Associate Professor in the department of Psychiatry at University of Texas Southwestern Medical Center. Her clinical interests include assessment of symptom validity and malingering, co-occurring disorders, (PTSD/SUD), exposure therapy, behavioral therapy for obsessive compulsive disorders and motivational enhancement techniques, including the role of personal values in commitment to change. Her theoretical orientation is comprised of behavioral and cognitive-behavioral approaches. Research interests include exploring novel and adjunctive treatments for PTSD, Military Sexual Trauma, personality disorders and development of outcome measures for performance enhancement.

Dr. Christopher St. John is a licensed Psychologist in the state of Texas. He received his Ph.D. in Counseling Psychology from the University of North Texas in 1995. Dr. St. John joined the VANTHCS in 1996 and currently serves as staff psychologist on the PTSD Clinical Team. Relatedly, his clinical interests involve PTSD treatment. He is a member of the Dallas Psychological Association.

Dr. Lisa Thoman is a licensed Psychologist in the state of Texas. She earned her Ph.D. in Clinical Psychology from the University of Texas Southwestern Medical Center at Dallas in 2003. She has been on staff at VANTHCS since 2002, and currently works within the MH Trauma Services Clinic, a specialty MH clinic which provides evidence-based assessment and psychotherapy to veterans with Posttraumatic Stress Disorder (PTSD). More specifically, Dr. Thoman provides individual, group and marital therapy to veterans of the OEF/OIF/OND era. Dr. Thoman is an Assistant Professor in the department of Psychiatry at University of Texas Southwestern Medical Center. Her clinical interests include treatment of PTSD and other disorders related to trauma. Her theoretical orientation is integrative with cognitive-behavioral, solution-focused and systemic emphases. Her research interests include treatment of PTSD and anxiety disorders, meditation and mindfulness in treatment of mental disorders, and impact of exercise on mood and anxiety. She is a member of the American Psychological Association and Dallas Psychological Association.

Dr. Meara Weitzman is a licensed psychologist in the state of Kansas. She received her Ph.D. in Clinical Psychology at Southern Methodist University in 2016. She completed a predoctoral internship at Bay Pines VA in Florida and a postdoctoral fellowship with a specialization in trauma at VANTHCS. Dr. Weitzman is currently on the WSDT/MST subteam of the Trauma Services Team. Her clinical interests include military sexual trauma, Prolonged Exposure Therapy, Cognitive Processing Therapy, and Dialectical Behavior Therapy. Her primary theoretical orientation is cognitive-behavioral.

Administrative Policies and Procedures

Our privacy policy is clear: We will not collect personal information about any visitors to our website.

Policies regarding the training program:

Although fellows accrue annual leave and sick leave per each pay period, it is the program's policy that fellow should not take more than five days of annual leave during any quarter of the year regardless of the amount of leave they have accrued. Exceptions can be made for extraordinary circumstances. The

purpose of this policy is to minimize absence from the work-related learning which is the core of the training program.

Mechanisms for addressing impaired or deficient performance and grievance procedures

Potential domains of problematic fellow behavior include two general areas:

- 1) Professional skills, competence and functioning
- 2) Adherence to professional ethics.

Relatively minor problems identified at quarterly evaluations may result in the modification of training experiences. Such modifications are the responsibility of the primary supervisor but may be based on consultation with the Training Director and/or the Postdoctoral Training Committee. Minor problems identified at the end of a quarter will be communicated to relevant supervisors of that fellow and/or the Postdoctoral Training Committee.

Problems deemed to be sufficiently serious to pose a potential threat to the fellow's successful completion of the fellowship program will be referred to the Training Committee for consideration. Such problems may be identified at any time. In case of a serious breach of ethical principles, the Training Committee may recommend to the Chief of Psychology that the fellow be terminated immediately. In most cases, though, the Training Committee will develop a written remediation plan to help the fellow achieve an acceptable level of performance. The remediation plan will specify the skills and/or behaviors to be changed and will stipulate a date for their remediation. The remediation plan may include a revision of the fellow's training schedule. A copy of this plan will be given the fellow. Within one week of the stipulated date for the completion of remediation of problems, the Training Committee will make a determination of progress. The Training Committee will consider input from supervisor(s) and the fellow. All Training Committee decisions will be by majority vote and will be communicated in writing to the fellow. Three determinations by the Training Committee are possible, each followed by a different course of action:

- (1) If a determination of satisfactory progress is made, the remediation plan will be terminated.
- (2) If the Training Committee determines that sufficient progress is being made so that it seems possible the fellow will successfully complete the fellowship but that further remediation is necessary, a revised remediation plan with completion date will be developed.
- (3) If a determination of unsatisfactory progress is made, the Training Committee will conduct a formal hearing with the fellow within one week of the meeting in which it is determined that unsatisfactory progress has been made. The fellow will receive a minimum three days' notice to prepare for this hearing. Issue(s) of concern will be addressed to the fellow by the Training Committee and any other staff electing to attend. The fellow will be afforded an opportunity to respond and may invite anyone of his/her choice to attend the hearing to provide additional information. Within one week of the hearing, the Training Committee will either develop a revised remediation plan or will recommend termination of the fellow to the Chief of Psychology, Training Director, and ACOS of Education. Proceedings of the hearing will be documented in a summary transcript.

At any time prior to termination from the fellowship program, a fellow may be permitted to resign his/her fellowship.

Grievance Procedure/Appeal Process: If the Training Committee recommends termination of the fellow from the program, the fellow may appeal this decision in writing to the Chief of Psychology within one week of the fellow's notification of the Training Committee's recommendation. If an appeal is made, the Chief of Psychology will appoint a panel to hear and rule on the appeal. The appeal panel will consist of no less than three psychologists, some or all of whom may be members of the VA North Texas Health Care System's Psychology Professional Community. No panel member will be a member of the Training Committee, a current or past supervisor of the fellow, or anyone who has previously lodged a formal complaint against the fellow. The fellow will present the appeal to their panel. The Training Director will then present the position of the Training Committee. The hearing will be conducted in an informal manner and will not be bound by legal rules of evidence or testimony. Either side may call and examine witnesses or present other information as it deems appropriate. A decision to terminate will be based on the evidentiary standard of clear and convincing proof. Any decision of the panel will be by simple majority. Proceedings of the appeal hearing will be documented in a summary transcript and kept in the Psychology office.

If the appeal panel recommends that the fellow's appointment be continued, the Chief of Psychology, Training Director, Training Committee, and Psychology staff will abide by this decision, taking into account any further recommendations of the panel. It will be the responsibility of the Training Director under these circumstances to negotiate with the fellow and appropriate supervisors an acceptable training plan for the balance of the training year.

A recommendation of termination by the appeal panel will be communicated to the VA North Texas Health Care System's ACOS of Education, accompanied by transcripts of both hearings and any pertinent supporting information or documents within one week of the appeal. The Chief of Staff will review the material for:

- (1) Evidence of failure to follow the procedures specified in this policy.
- (2) Evidence of capriciousness or arbitrariness in the action.

Affirmation of either of these by the Chief of Staff would result in the fellow being retained. Otherwise the fellow will be terminated immediately.

The results of the appeal proceedings will be communicated in writing to the fellow.

Application Process

Applications due: December 9, 2019

The Psychology Fellow must have completed all requirements for the doctoral degree (Ph.D. or Psy.D.) in Clinical or Counseling Psychology from an institution accredited by the American Psychological Association, including the completion of a doctoral internship in professional psychology (that also must be accredited by the American Psychological Association). An internship and/or practicum experiences involving the following populations or clinics are not required, but applicants with these backgrounds will be preferred: Substance Abuse, Post-traumatic Stress Disorder (PTSD), Primary Care, LGBT Emphasis, and Health and Rehabilitation Psychology.

NON-DISCRIMINATION POLICY

VA is committed to ensuring Equal Employment Opportunity (EEO), promoting workforce diversity, workplace inclusion, and constructively resolving conflict to sustain a high-performing organization in service to our Nation's Veterans. VA will vigorously enforce all applicable Federal EEO laws, executive orders, and management directives in order to ensure equal opportunity in the workplace for all VA employees. This document summarizes VA's EEO, Diversity and Inclusion, Notification and Federal Employee Antidiscrimination and Retaliation Act (No FEAR), and Whistleblower Rights and Protection policies.

VA does not tolerate unlawful discrimination, including workplace harassment, based on race, color, religion, national origin, sex (including gender identity, transgender status, sexual orientation, and pregnancy), age (40 or older), disability, genetic information, marital status, parental status, political affiliation, or retaliation for opposing discriminatory practices or participating in the discrimination-complaint process. This applies to all terms and conditions of employment, including recruitment, hiring, promotions, transfers, reassignments, training, career development, benefits, and separation.

The North Texas VA Healthcare System is committed to upholding an inclusive environment so that the associated stakeholders, (Veterans, supervised trainees, staff psychologists, technical and clerical staff) feel encouraged and supported to incorporate all aspects of themselves into their experience at our facility. We believe that the honoring of the unique aspects of each individual is compulsory for the optimal development of highly qualified, effective and satisfied professionals, and ultimately, improves the quality of the services that we provide to our Veterans.

Application:

We are participating in the APPA CAS (APPIC Psychology Postdoctoral Application) process this year. All application materials are to be submitted through this process. <http://www.appic.org/>

To apply, the following materials are needed:

1. A letter of interest that identifies career goals and designation of the emphasis area to which you are applying
2. A doctoral program transcript
3. A current curriculum vitae
4. Three letters of recommendation, one of which must be from an internship supervisor
5. Two de-identified work samples

The work samples must include:

1. A Psychological Assessment report co-signed by a licensed psychologist*. Data sources should include clinical interview and several psychological testing instruments.
2. A Psychotherapy Case Summary, but not just an assessment and treatment plan. This summary should document the course and outcome of a completed case or a current case to date. This summary should not be a collection of progress notes or psychotherapy notes and it need not be co-signed by a licensed psychologist.

**If the psychological assessment report is not co-signed by the supervising psychologist, your application will NOT be considered.*

**Both work samples should be for adult cases.*

Application materials MUST be received by **December 9, 2019** for all fellow positions. After receipt of written materials, suitable applicants will be called to set up interviews with residency faculty. In person interviews are preferred but we realize that the cost of travel may be prohibitive. Therefore, phone interviews are acceptable. In accordance with APPIC guidelines, we will follow the official notification date of February 24th to make offers for positions. At the time that a position is offered, the selectee may accept, decline, or request that they be able to put the offer on hold before a decision is required.

If you are selected as a fellow, you will be considered a Federal employee, and the following requirements will apply.

1. U.S. citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns and fellows must complete a Certification of Citizenship in the United States prior to beginning VA training.
2. A male applicant born after 12/31/1959 must have registered for the draft by age 26 to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are very rarely granted.
3. Interns and Fellows are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens. Please find additional information about the required background checks at the following website (<http://www.archives.gov/federal-register/codification/executive-order/10450.html>)
4. VA conducts drug screening exams on randomly selected personnel as well as new employees. Interns and Fellows are not required to be tested prior to beginning work, but once on staff they are subject to random selection for testing as are other employees.
5. To comply with federal and VA rules and provide fellows with liability protection, a current and valid Affiliation Agreement between VA and the sponsoring doctoral program must be on file before the fellow can be appointed. Most APA-accredited doctoral programs already have an agreement on file. More information is available at <http://www.va.gov/oaa/agreements.asp> (see section on psychology fellowships).
6. Following acceptance of a fellowship offer and prior to the start of fellowship, the Fellowship Training Director will contact each fellow to complete the Trainee Qualifications and Credentials Verification Letter (TQCVL). This document is required for all VA Psychology Fellowship programs. This document confirms that you (as a VA Trainee) are in satisfactory physical condition to meet the requirements of the fellowship program as well as attesting that fellows have met appropriate tuberculosis screening as well as other immunization screenings. Such documentation is not uncommon prior to working in a healthcare setting. Appointment to the fellowship cannot happen until this document has been signed by both the Fellowship Training Director and senior leadership from the VA North Texas Health Care System. We will work closely with you to ensure this document is completed in a timely manner. For more information about this document, please see the web address linked here (https://www.va.gov/OAA/TQCVL/TQCVL_Guide2018FINAL.pdf).
7. Selected fellows will be required to complete pre-employment documentation prior to the start of fellowship. These forms include the Application for Health Professions Trainees (VA 10-2850D), the Declaration for Federal Employment (OF 306), and the Health Professions Trainee

Random Drug Testing Notification and Acknowledgement Memo. These documents are available online for review (<https://www.va.gov/oaa/app-forms.asp>). Falsifying any answer on these required Federal documents will result in the inability to appoint a fellow or will result in the fellow's immediate dismissal from the training program.

8. Prior to the start of the fellowship, fellows must supply documentation from their university that they have completed all degree requirements. Fellows cannot begin the fellowship program without this documentation.

Contact Information

Director of Psychology Training

Dr. Jamylah Jackson is board certified in Clinical Psychology (ABPP) and received her Ph.D. in Clinical Psychology in 2005 from the University of Georgia at Athens. She completed her Doctoral Internship (2004) and Postdoctoral Fellowship (2006) at VANTHCS, and has been on staff since that time. In addition to her role as Director of Psychology Training, Dr. Jackson is the Director of Education and Training for the Mental Health Service line. Dr. Jackson is an Associate Professor in the department of Psychiatry at University of Texas Southwestern Medical Center. Her clinical interests include Substance Abuse/Dependence Treatment, Co-morbid conditions of Substance Abuse, PTSD, and Diversity/Multicultural Issues. Her theoretical orientation is comprised of cognitive-behavioral, behavioral and interpersonal approaches.

Questions regarding the application materials or process should be directed to:

Jamylah K. Jackson, Ph.D., ABPP, Director of Psychology Training
VANTHCS - 4500 S. Lancaster Rd.
Mental Health Service (116/TS)
Dallas, TX 75216
Direct: (214) 857-3601
E-mail: jamylahk.jackson@va.gov

Accreditation Status

The postdoctoral fellowship at **VA North Texas Health Care System** is accredited by the Commission on Accreditation of the American Psychological Association. The most recent reaccreditation site visit occurred on May 15-16, 2019. The program has been reaccredited for ten years. Our next site visit will occur in 2029.

For information regarding APA accreditation of this residency or other accredited residencies, please write or call:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242
Phone: (202) 336-5979
Fax: (202) 336-5978
E-mail: apaaccred@apa.org

Fellowship Admissions, Support, and Initial Placement Data

Fellowship Program Admissions

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on fellow selection and practicum and academic preparation requirements:
<p>The Psychology Fellow must have completed all requirements for the doctoral degree (Ph.D. or Psy.D.) in Clinical or Counseling Psychology from an institution accredited by the American Psychological Association, including the completion of a doctoral internship in professional psychology (that also must be accredited by the American Psychological Association). An internship and/or practicum experiences involving the following populations or clinics are not required, but preference for applicants with these backgrounds will be preferred: Substance Abuse, Post-traumatic Stress Disorder (PTSD), Primary Care, LGBT Emphasis, and Health and Rehabilitation Psychology.</p> <p>Our program abides by the Department of Veterans Affairs commitment to ensuring equal opportunity (EEO), and promoting diversity and inclusion, all applicable Federal EEO laws, regulations, Executive Orders, and Management Directives. As provided by the Policy, the VA will not tolerate discrimination or harassment on the basis of race, color, religion, national origin, sex, pregnancy, gender identity, genetic information, parental status, sexual orientation, age or disability.</p> <p>The North Texas VA Healthcare System is committed to upholding an inclusive environment so that the associated stakeholders, (Veterans, supervised trainees, staff psychologists, technical and clerical staff) feel encouraged and supported to incorporate all aspects of themselves into their experience at our facility. We believe that the honoring of the unique aspects of each individual is compulsory for the optimal development of highly qualified, effective and satisfied professionals, and ultimately, improves the quality of the services that we provide to our Veterans.</p>
Minimum criteria:
N/A

Financial and Other Benefit Support for Upcoming Training Year

Annual Stipend/Salary for Full-time Fellows	\$49,311
Annual Stipend/Salary for Half-time Fellows	N/A
Program provides access to medical insurance for residents?	Yes
If access to medical insurance is provided Trainee contribution to cost required?	Yes
Coverage of family member(s) available?	Yes
Coverage of legally married partner available?	Yes
Coverage of domestic partner available?	Yes
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	13 days

Hours of Annual Paid Sick Leave	13 days
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes
Other Benefits (please describe)	10 Federal Holidays

Initial Post-Fellowship Positions

	2015-18	
Total # of fellows who were in the 3 cohorts	20	
Total # of fellows who remain in training in the residency program	7	
	PD	EP
Community mental health center		
Federally qualified health center		
Independent primary care facility/clinic		
University counseling center		
Veterans Affairs medical center		11
Military health center		
Academic health center		3
Other medical center or hospital		3
Psychiatric hospital		
Academic university/department		
Community college or other teaching setting		
Independent research institution		
Correctional facility		
School district/system		
Independent practice setting		2
Not currently employed		
Changed to another field		1
Other		
Unknown		

Note. "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table is counted only one time. For former trainees working in more than one setting, the setting that represents their primary position was selected.

Appendix A: Compilation of Supervisory Staff Bios

Dr. John Black is a licensed Psychologist in the state of Texas. He earned his Ph.D. in Clinical Psychology from the University of North Carolina at Greensboro in 1978. He has been on staff at VANTHCS since 1982 and currently serves as staff psychologist on the PTSD Clinical Team. Dr. Black's clinical interests are PTSD and EMDR, with research interests of drug abuse treatment and PTSD. His theoretical orientation is behavioral. Dr. Black is a member of the American Psychological Association, Association for Behavioral and Cognitive Therapies, and the EMDR International Association.

Dr. Matthew Chester is a licensed Psychologist in the state of Texas. He earned his Ph.D. in Counseling Psychology from The University of Texas at Austin in 2018 after completing his predoctoral internship at Duke University Counseling and Psychological Services. He completed a Patient Aligned Care Team (PACT) Postdoctoral Fellowship at VANTHCS. Dr. Chester currently serves as a member of the Primary Care Mental Health Integration Team. His research interests include LGBT health and wellness, with special emphasis on gay men and masculinities. His clinical interests include brief therapeutic interventions, LGBTQ issues, gender identity and its expression, race and cultural diversity, and mindfulness/meditation. Dr. Chester's theoretical orientation is humanistic and multicultural.

Dr. Helen Chung received her Ph.D. in Counseling Psychology from Oklahoma State University in 2014. She completed her Doctoral internship in medical/health psychology and Postdoctoral fellowship in geropsychology at VANTHCS. She has been on staff since 2015, first in the Spinal Cord Injury Center and recently moved to the Community Living Center (CLC). Her clinical and research interests include rehabilitation, adjustment to disability, coping with chronic medical conditions, health psychology (e.g. diabetes/weight management), and geropsychology. Her theoretical orientation is primarily cognitive behavioral and solution-focused. She is a member of the American Psychological Association – Divisions 20, 22, 38, and the Academy of SCI Professionals.

Dr. M. Catherine Dodson is licensed in the state of Kansas. She earned her Ph.D. in Clinical Psychology from Southern Methodist University in 2013. She joined the staff at VANTHCS during that year and expects to be licensed in the state of Kansas in 2014. Dr. Dodson provides clinical services on the Mental Health Silver Team. She is an Assistant Professor in UT Southwestern Medical Center's Department of Psychiatry. Her clinical interests are in geropsychology, treatment of PTSD, treatment of mental disorders associated with aging and illness, individual and group psychotherapy. Her research interest is intimate partner violence. Dr. Dodson's theoretical orientation is cognitive behavioral and behavioral.

Dr. Michael Dolan is a licensed Psychologist in the state of Texas. He earned his Ph.D. in Clinical Psychology from the University of Kentucky in 1975. He has been on staff at VANTHCS since 1978, and currently works on the MH Gold team, focusing on the assessment and treatment of chronic substance use disorders, which is his primary clinical interest. His theoretical orientation is cognitive-behavioral. His research interests include the use of contingency contracting to decrease drug abuse, cocaine addiction, needle-sharing and AIDS education. He is a member of the American Psychological Association.

Dr. Rebecca A. Frontera received her Psy.D. in Clinical Psychology from the Adler School of Professional Psychology in 2011. She completed a Doctoral internship at Mount Sinai Medical Center within the department of Rehabilitation Medicine in New York, NY and completed a Postdoctoral fellowship in Rehabilitation Psychology at the James A. Haley VAMC in Tampa, FL. Dr. Frontera joined VANTHCS in 2013 and works within the Spinal Cord Injury Center. Her research interests include adjustment to disability, disability and sexuality, limb amputation, and resiliency. Dr. Frontera's clinical interests involve rehabilitation of spinal cord injury (SCI) and traumatic brain injury (TBI), adjustment to disability, multiple

sclerosis, ALS, disability and sexuality, and coping with chronic medical conditions. Her theoretical orientation is eclectic with cognitive behavioral, solution-focused, and person-centered. She is a member of the American Psychological Association - Divisions 22 and the Academy of SCI Professionals.

Dr. Jamylah Jackson serves as the Director of Training for the psychology programs within VANTHCS. She is board certified in Clinical Psychology (ABPP) and received her Ph.D. in Clinical Psychology in 2005 from the University of Georgia at Athens. She completed her Doctoral internship (2004) and Postdoctoral Fellowship (2006) at VANTHCS, and has been on staff since that time. Dr. Jackson is a staff psychologist within the MH Trauma Services Clinic, a specialty MH clinic which provides evidence-based assessment and psychotherapy to veterans with Posttraumatic Stress Disorder (PTSD). More specifically, Dr. Jackson provides individual and therapy to veterans of the OEF/OIF/OND era. Dr. Jackson is an Assistant Professor in the department of Psychiatry at University of Texas Southwestern Medical Center. Her clinical interests include Substance Abuse/Dependence Treatment, Co-morbid conditions of Substance Abuse, PTSD, and Diversity/Multicultural Issues. Her theoretical orientation is comprised of cognitive-behavioral, behavioral and interpersonal approaches.

Dr. Heejin Kim is a licensed psychologist in the state of Texas. She earned her Psy.D. in Clinical Psychology from Pepperdine University in 2011. She joined the staff at VANTHCS in 2015. Dr. Kim provides clinical services on the Mental Health Silver Team, including neuropsychological assessments, individual therapy, and group therapy. Her current research interest is the cultural adaptation of a cognitive screening tool with stroke populations. Her clinical interests include geropsychology, assessment of dementia disorders, and assessment and rehabilitation with stroke populations.

Dr. Jennifer B. Mayfield is a licensed Psychologist in the state of Iowa. She received her Ph.D. in Counseling Psychology from the University of Illinois at Urbana-Champaign in 2012. Dr. Mayfield completed a Postdoctoral fellowship at VANTHCS and joined the staff in 2013. She provides clinical services within the MH Gold Team. A member of the American Psychological Association, her clinical interests include substance abuse and comorbid disorders and treatment as well as evidence-based PTSD treatment. Her research interest is in contingency management. Dr. Mayfield's theoretical orientation is cognitive behavioral, interpersonal, uses multicultural counseling theory, and involves community reinforcement approaches to substance abuse treatment.

Dr. Anushka Pai is a licensed Psychologist in the state of Texas. She earned her Ph.D. in Clinical Psychology from the University of Texas at Austin in 2011. Dr. Pai joined VANTHCS in 2015. She provides clinical services within MH trauma services, on the Military Sexual Trauma/Women's Stress Disorder and OEF/OIF/OND teams. She is a member of the American Psychological Association. Her theoretical orientation is cognitive-behavioral, and her research interests include the treatment of PTSD and anxiety disorders.

Dr. Colleen Richardson serves as Chief of Psychology. She is a licensed Psychologist in the state of Colorado. She earned her Psy.D. in Clinical Psychology from the Florida School of Professional Psychology in 2007. In 2006, she accepted a commission and internship in the United States Navy. Dr. Richardson deployed for a year in 2008 with Regimental Combat Team One, where she served as the Operational Stress Control and Readiness Provider (OSCAR), and the Camp Fallujah's psychologist for the Shock Trauma Platoon. She was the first female OSCAR provider, delivering front-line mental health support and services, such as crisis intervention, individual and group therapy, grief and loss debriefs and substance abuse training, to the Marines and Sailors attached to RCT-1. She traveled on over 100 combat patrols and convoys, treating close to 6,000 personnel. She trained over 500 Corpsmen on how to identify the signs and symptoms of post-traumatic stress disorder, anxiety and depression. After completing her

deployment, she was assigned to Wounded Warrior Battalion-West as the Battalion director and psychologist. While at WWB-West, Dr. Richardson designed and established an outpatient mental health program for the Marines and Sailors wounded in Iraq and Afghanistan. She also provided educational trainings on mental health disorders and traumatic brain injury to clinical and non-clinical partners, and coordinated additional care through a multi-disciplinary approach with other DoD and VA professionals. She has been working for the VA for 5 years and previously served as the Clinical Director of the Gold Team's Substance Abuse Program. Her theoretical orientation is cognitive behavioral. She is certified in CPT, PE & EMDR for trauma work.

Dr. Tara Luchkiw Rosema is a licensed Psychologist in the state of Michigan. She earned her Ph.D. in Clinical Psychology from the University of Mississippi in 2016. She completed her predoctoral internship in health psychology and postdoctoral fellowship in interprofessional team-based care at the Cincinnati VA Medical Center. On both internship and fellowship, she completed rotations in organizational health at the National Center for Organization Development (NCOD). She currently serves as a psychologist in the Spinal Cord Injury Center. Her clinical interests include promotion and maintenance of health and wellness behaviors utilizing coaching skills, behavioral and cognitive behavioral therapy, Motivational Interviewing, and Acceptance and Commitment Therapy. She has a particular interest in interventions to improve organizational systems including team assessment, culture change initiatives, leadership coaching, team-building, change management efforts, consultation, and program development/evaluation. Her theoretical orientation is primarily contextual behavioral.

Dr. LaDonna Saxon is a licensed Psychologist in the state of Kansas. She received her Ph.D. in Clinical Health Psychology and Behavioral Medicine from the University of North Texas in 2008 and completed a fellowship in Chronic Pain Rehabilitation at James A Haley VAMC in Tampa, FL. She joined VANTHCS in 2012 and serves as Health Behavior Coordinator and Tobacco Cessation Lead Clinician. She holds a faculty appointment as an Assistant Professor in the department of Psychiatry at University of Texas Southwestern Medical Center. Her research interests involve health promotion/health maintenance and coping with chronic health conditions. Her clinical interests include motivational interviewing, mindfulness, response to injury/disability, health coaching, and health promotion/disease prevention. Dr. Saxon's theoretical orientation is cognitive behavioral and humanistic. She is a member of the Motivational Interviewing Network of Trainers, the Institute for Meditation and Psychotherapy, the American Congress of Rehabilitation Medicine, the American Psychological Association – Division 38 (Health Psychology), and the National Association of School Psychologists.

Dr. Emma Shapiro earned a Ph.D. in Clinical Psychology with an emphasis in Neuropsychology from Palo Alto University in 2016. She completed a Predoctoral Internship at the Battle Creek VA in Michigan, and a two-year Neuropsychology Fellowship at the North Texas VA Health Care System. Dr. Shapiro joined the staff as a Neuropsychologist on the Spinal Cord Injury unit upon completion of her Neuropsychology Fellowship in 2018. Her clinical and research interests include PTSD, dementia, MS, and movement disorders. Dr. Shapiro's theoretical orientation is cognitive-behavioral.

Dr. Meredith Shaw is a licensed Psychologist in the state of Texas. She received her Ph.D. in Clinical Psychology from the University of Maryland, Baltimore County in 2011. Dr. Shaw joined VANTHCS in 2011 and currently serves as a clinical director of the Mental Health Gold Team, the substance abuse specialty team. Her interests include treatment of depression, anxiety, substance-related disorders, trauma and stress-related disorders, chronic pain, and health behavior change. Her primary treatment approaches are Cognitive Behavioral Therapy, Acceptance and Commitment Therapy, and Motivational Interviewing. She

holds a faculty position as an Assistant Professor of Psychiatry at the University of Texas, Southwestern Medical Center (UTSW), and is involved with training medical students, residents, and fellows.

Dr. Julia Smith is the Assistant Director of Training for the psychology programs and Clinical Director of MH Trauma Services. She is a licensed psychologist in the states of Texas and Kansas. She received her Psy.D. in Clinical Psychology from the Illinois School of Professional Psychology (ISPP) in 2008. She completed her Postdoctoral fellowship at VANTHCS (2008-2009), and has been on staff since that time. Dr. Smith also serves as a staff psychologist within the MH Trauma Services Clinic as the PTSD/Substance Use Disorder (SUD) Specialist. Dr. Smith is an Associate Professor in the department of Psychiatry at University of Texas Southwestern Medical Center. Her clinical interests include assessment of symptom validity and malingering, co-occurring disorders, (PTSD/SUD), exposure therapy, behavioral therapy for obsessive compulsive disorders and motivational enhancement techniques, including the role of personal values in commitment to change. Her theoretical orientation is comprised of behavioral and cognitive-behavioral approaches. Research interests include exploring novel and adjunctive treatments for PTSD, Military Sexual Trauma, personality disorders and development of outcome measures for performance enhancement.

Dr. Christopher St. John is a licensed Psychologist in the state of Texas. He received his Ph.D. in Counseling Psychology from the University of North Texas in 1995. Dr. St. John joined the VANTHCS in 1996 and currently serves as staff psychologist on the PTSD Clinical Team. Relatedly, his clinical interests involve PTSD treatment. He is a member of the Dallas Psychological Association.

Dr. Lisa Thoman is a licensed Psychologist in the state of Texas. She earned her Ph.D. in Clinical Psychology from the University of Texas Southwestern Medical Center at Dallas in 2003. She has been on staff at VANTHCS since 2002, and currently works within the MH Trauma Services Clinic, a specialty MH clinic which provides evidence-based assessment and psychotherapy to veterans with Posttraumatic Stress Disorder (PTSD). More specifically, Dr. Thoman provides individual, group and marital therapy to veterans of the OEF/OIF/OND era. Dr. Thoman is an Assistant Professor in the department of Psychiatry at University of Texas Southwestern Medical Center. Her clinical interests include treatment of PTSD and other disorders related to trauma. Her theoretical orientation is integrative with cognitive-behavioral, solution-focused and systemic emphases. Her research interests include treatment of PTSD and anxiety disorders, meditation and mindfulness in treatment of mental disorders, and impact of exercise on mood and anxiety. She is a member of the American Psychological Association and Dallas Psychological Association.

Appendix B: Placement of Past Fellows

Past trainees by their university of degree and current positions:

<u>Year</u>	<u>Degree Program</u>	<u>Current Position</u>
07-08	Virginia Tech U. U. of North Texas	Research - UTSW VA Psychologist – North TX
08-09	Georgia Sch. Of Prof. Psych Illinois Sch. Of Prof. Psych Nova Southeastern U.	VA Psychologist – North TX VA Psychologist - North TX VA Psychologist – Montgomery, AL
09-10	U. California, Santa Barbara U. of TX Southwestern Med. Ctr. Jackson State U.	VA Psychologist – North TX VA Psychologist – North TX
10-11	Argosy U., Hawaii U. of Houston U. of Louisville U. of Alabama Nova Southeastern U.	Private Practice - WA Private Practice - TX VA Psychologist – Nashville TN VA Psychologist – North TX VA Psychologist – Bay Pines FL
11-12	Auburn University U. of Maryland, Baltimore Co. Texas Tech U. U. of North Texas	VA Psychologist – Nashville TN VA Psychologist – North TX VA Psychologist – Reno, NV VA Psychologist – North TX
12-13	Chicago School of Prof. Psych Colorado State U. U. of Illinois @ Urbana-Champaign U. of North Texas	VA Psychologist – North TX University Counseling Center - TX VA Psychologist – North TX VA Psychologist – North TX
13-14	U. of Houston Kent State U. Southern Methodist U. Baylor U. Pacific School of Grad. Psych U. of North Texas	VA Psychologist – Valley Coastal Bend VA Psychologist – South TX Psychologist – Private Sector VA Psychologist – North TX Research - Romania VA Psychologist – North TX
14-15	U. of North Texas Oklahoma State U. U. of North Texas U. of North Texas Southern Methodist U. Texas A&M	VA Psychologist – North TX VA Psychologist – North TX VA Psychologist – North TX VA Psychologist – North TX VA Psychologist – North TX VA Research Psychologist – North TX
15-16	U. of North Texas Chicago School of Prof Psych School of Prof Psych at Forest Institute Midwestern University at Glendale Jackson State University Arizona School of Prof Psych	Scottish Rite Children’s Hospital VA Psychologist – North TX UT Southwestern Medical Center Baylor Hospital VA Psychologist – North TX VA Psychologist – Cental TX

16-17	Texas Women's University	VA Psychologist – Truman HCS
	Southern Methodist University	VA Psychologist – North TX
	U. of North Texas	UT Southwestern Medical Center
	Wheaton College	VA Psychologist – North TX
	Seattle Pacific University	Private Hospital
	Pennsylvania State University	VA Psychologist – Phoenix HCS
	St. John's University	Scottish Rite Children's Hospital
17-18	University of Houston	Private Practice
	University of Louisville	VA Psychologist – Lexington VA
	Fuller Theological Seminar	VA Psychologist – Minneapolis VA
	UT Southwestern Medical Center	Private Practice
	Californa School of Professional Psychology – Alliant International Univ.	Unemployed
	University of North Texas	VA Psychologist – North TX
	Texas Women's University	VA Psychologist – North TX
18-19	Fielding Graduate Univ, Santa Barbara	Community Hospital
	University of Texas, Austin	VA Psychologist – North TX
	Texas Women's University	VA Psychologist – North TX
	University of Texas, Austin	VA Psychologist – North TX
	Baylor University	VA Psychologist – North TX
	Loma Linda University	Unemployed
	Argosy University	VA Psychologist – North TX

For our most recent APA reaccreditation self study (2018), we surveyed the last seven years of graduates with an outcome assessment device involving 30 questions. Interpretation of the survey data by the Postdoctoral Training Committee is noted herein:

88% of graduates completed the survey (35 of 40). This completion rate is viewed as an indication of graduates' interest in the program as well as interest in providing information to APA.

Findings include:

- 34 of 35 responders were fully licensed. The one person who was not licensed at the time of the survey became licensed within the first two years of completing the fellowship.
- 34 of 35 graduates had obtained employment as psychologists, and the other person was pursuing employment at the time of the survey.
- Employment sites for the first job reveal a variety of settings, demonstrating that the program graduates' interests are varied with some moving toward private practice as well as medical center settings (primarily the VA).
- 71% of respondents reported a VA psychology position as their first job and 66% indicated that they currently work at a VA.
- 89% of respondents further noted that they spent approximately 40% of their clinical time working with patients dealing with problems related to the postdocs' emphasis area.

